

MEDICAL TEACHING INSTITUTION AYUB TEACHING HOSPITALABBOTTABAD

APPLICATION FORM FOR THE POST OF DRIVER IPS-01

Instruction:	

Name & Signature of the Candidate

- 1. This application form duly completed should be submitted to the Manager HR Ayub Teaching Hospital, Abbottabad on or before the due date along with, attested photocopies of qualifications, domicile, experience certificates, driving license and any other relevant documents.
- 2. The Interested candidates received prescribed application form from HR Department ATH, Abbottabad on payment of Rs.500/- or download the subject form from official website www.ath.gov.pk and must attached bank draft of Rs.500/- in favor of Hospital Director MTI, ATH Abbottabad.

1.	Name (in t	Name (in block letters)							
2.	Father's Name								
3.	Address and other particulars: a. For correspondence (interview call)								
	b. Mobilec. Ph. Nod. Permanent Home Address								
	e. Ph. No								
4.	<u> </u>	ıl Status		j. Don					
S.No	Certificate /Degree			Exam With year of passing		Division/ Distinction		%Marks Obtained	
<u>5.</u> S.No	Employment Nam		Starting fron	n the present		on): /Contract	Nature of Job	(Permanent/	
	Insti Organi	tute	From-To	Designation	B. 3	Contract	Tempo		
are tr	I hereby declare ue to the best of m		• •	lication form, all the	addition	nal particulars ((if any) furnished al	ong with it,	

Dated: _____/___2025